## CITY OF WICHITA DEPARTMENT OF PARK & RECREATION PLAYGROUND MATCHING FUND APPLICATION

Date of Application:     Name and Address of Neighborhood Association:     Name of Contact Person:			
		Phone#:Add	dress:
		4. Names and Addresses of Association Officers:	
5. Name of Park:			
6. Approximate dollar amount of match requested: \$			
7. Scope of project (give as much	detail as possible, including whether match		
will be primarily cash or in-kind co	ontributions):		
Larry Hoetmer	Authorized Neighborhood		
Landscape Architect	Representative		
Approved:			
Douglas R. Kupper, CPRP	Date		
Director	Date		
Park and Recreation Department			

Note: The neighborhood association has 18 months from the date of this application to raise the necessary matching funds for the project.